PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885



or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of the Fee(s)

MERCHANT & GOULD PC P.O. BOX 2903

ليوم

MINNEAPOLIS, MN 55402-0903

Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)	
(Signature)	
(Date)	
· · · · · · · · · · · · · · · · · · ·	

APPLICATION NO.	FILING DATE	FIR	ATTORNEY D	OCKET NO.	CONFIRMATION NO.	
10/038,626	January 8, 2002	A	Alison L. Sparks		51USU1	9254
TITLE OF INVENTION: DENDRITIC CHEM	ILUMINESCENT SUB	STRATES				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEES DUE		DATE DUE
nonprovisional	No	\$1,400.00	\$300.00	\$1,700.00	Apı	ril 12, 2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
Mary Ceperley	1641	436-546000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR,	1.	Merchant & Gould, P.C.
Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication	alternatively, (2) the name of a single firm (having as a member a registered	2.	Christopher W. Raimun
form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	attorneys or agents. If no name is listed, no name will be printed.	3.	

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment

(A) NAME OF ASSIGNEE

Typed or printed name

(R) RESIDENCE: (CITY and STATE OF COUNTRY)

Registration No. 01 FC:1501

(T) THE OF HOUSE	(b) RESIDENCE. (CIT I and STATE OR COUNTRY)					
APPLERA CORPORATION	BEDFORD, MASSACHUSETTS					
Please check the appropriate assignee category or categories (will not be print	ted on the patent): Individual Corporation or other private group entity Government					
4a. The following fee(s) are enclosed: ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies	4b. Payment of Fee(s): ☐ A check in the amount of the fee(s) is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-2725 (enclose an extra copy of this form).					
5. Change in Entity Status (from status indicated above)a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.	 □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). 					
The Director of the USPTO is requested to apply the Issue Fee and Publication NOTE: The Issue Fee and Publication Fee (if required) will not be accepted fin interest as shown by the records of the United States Patent and Tradelnark	on Fee (if any) or to re-apply any previously paid issue fee to the application identified above. from anyone other than the applicant; a registered attorney or agent; or the assignee or other party k Office.					
Authorized Signature	Date April 4, 2007 94/95/2997 57FHDTF2 99999954 132725 1003862					

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Christopher W. Raimund

ATTORNEY DOCKET NO. 70013.0251USU1 **RANSMITTAL FORM** U.S. APPLICATION SERIAL NO. CONFIRMATION NO. 9254 10/038,626 be used on all correspondence after initial filing) FILING DATE **January 8, 2002** INVENTOR(S) **EXAMINER** GROUP ART UNIT Álison L. Sparks **Mary Ceperley** 1641 TITLE OF APPLICATION DENDRITIC CHEMILUMINESCENT SUBSTRATES Mailstop Issue Fee **Commissioner for Patents** ADDRESS TO: P.O. BOX 1450 **ALEXANDRIA, VA 22313-1450 ENCLOSURES** Transmittal Form **Issue Fee Transmittal (In Duplicate) Issue Fee Transmittal (In Duplicate) Return Postcard**

Please charge Deposit Account No. 13-2725 in the amount of \$1,700.00 to cover any required fees. In the event any variance exists between this amount and the Patent Office charges for filing the above-noted documents, including any fees required under 35 CFR 1.136 for any necessary extension of time to make the filing of the attached documents timely, please charge or credit the difference to Deposit Account No. 13-2725. Further, if these papers are not considered timely filed, then a request is hereby made under 37 CFR 1.136 for the necessary extension of time.

CORI	RES	PON	DEI	NCE	ADI	DRE	SS
			_				

The address associated with Customer Number:

23552

OR the correspondence address below.

Address

Name

City

State

Zip Code

NAME			REGISTRATION NO.		
SIGNATURE	0162	DATE	April 4, 2007	TELEPHONE	202 326-0300
NAME	Christopher W. Raimund		REGISTRATION NO.	47,258	